

Department of Health

Maggie Brooks County Executive Andrew Doniger, M.D., M.P.H. Director

Subject: Fee Waiver exemptions

Dear Food Service Establishment Operator:

Fees for exempt, governmental and charitable non-profit institutions are now 50% of the standard fee, and will be charged to agencies with annual operating expenses **over \$50,000**. If you are **not** presently on our Fee Waiver List, you need to fill out the Fee Waiver Request Form. You must also include a copy of the documentation from the Internal Revenue Service stating your organization is recognized under Section 501C (2) or (3) as being both a charitable and non-profit organization. Please mail these items to us for approval.

Small governmental and charitable non-profit organizations with annual operating expenses of \$50,000 or less may qualify for **full exemption status**. If you are **not** already on our Fee Waiver List you must complete a Fee Waiver Request Form. Also, you must include a copy of documentation from the Internal Revenue Service stating your organization is under Section 501C (2) or (3) showing that you are both a charitable and non-profit organization. Or that you are a governmental agency receiving more than 50% of operating funds from general tax revenues **and** provide **one of the following** as proof that your annual operating expenses **does not exceed \$50,000**:

- (1) a copy of your organization's financial statement; or
- (2) a copy of your corporate tax return.

If you do not provide the financial documents required for full fee waiver, but have an approved Fee Waiver Request Form on file with the Department of Health, you will be assessed 50% of the standard Environmental Health Service Fee.

A Fee Waiver Request Form is enclosed. Please complete the form and return to the Monroe County Department of Health along with the listed required documents if you are requesting a full fee waiver.

If you have any questions regarding this matter, feel free to contact me at 753-5047.

Sincerely,

Robert E. Mauro Senior Public Health Sanitarian

*Note: Food Worker Training fees are not eligible for exemption.



FEE WAIVER REQUEST FORM

		Date
I hereby request a waiver of (50%) (100%) for environmental services received. I request this Wa		
Charitable non-profit		
Governmental receiving mo	re than 50% of operating funds from	n general tax revenues
FOR CHARITABLE NON-PROFIT PLEASE ATTACH	THE FOLLOWING ITEM(S):	
A copy of your INTERNAL REVENUE EXEMPTIO	N DOCUMENT 501 (C) 2 OR 3	
For those entities requesting 100 Fees, you must provide documentat expenses are \$50,000 or less. In	ion that your organiza	ntion's annual
A copy of a completed Internal Rever	nue Service Form 990, 990-E	
OR		Monroe County Health Dept. 111 Westfall Road – Room
A copy of your organization's financial statement for	or the most current full year.	1020
(Please print)		
Services rendered:		
Location:		
Fee required: Organization Name:		
Mailing Address:		
Signature & Title:		
DO NOT WRITE BELOW THIS LINE		
FOR OFFICE USE ONLY:		
Recommend		
Deny	DATE :	
This Department has found your request for Waiver to of the payment of this and future Environmental fees up		
Charitable non-profit		
Governmental receiving mo revenues.	re than 50% of operating funds from	n general tax
Operating with annual expe	nses of \$50,000 or less – proof prov	vided.
	Sincerely,	
	Androw C. Donigor, M.D. A	A D LI

Andrew S. Doniger, M.D., M.P.H. Director of Health